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Facsimile Transmittal

NOV 25 2003

OFFICE

To: Examiner M. Dibrino, USPTO
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Please return to Mel Atkins

No. of Pages: 10 (including cover)
Date: November 25, 2003

4870/38163-0034

Message: RE: 09/529,121 Schlom et al. - Our Ref: 38163-0034 - Conf. No. 9401

Dear Examiner Dibrino,

Please see the attached Amendment and Request For Reconsideration Under 37 CFR § 1.116.

Thank you.

DC 108731 v1
11/25/03 3:17 PM (38163.0034)

HL

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PTO/SB/97 (08-00)

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Transmittal Form (1-page)

Fee Transmittal (1-page)

Petition for Extension of Time (1-page)

Amendment and Reconsideration Under 37 CFR Sec. 1.116 (5-pages)

PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☐

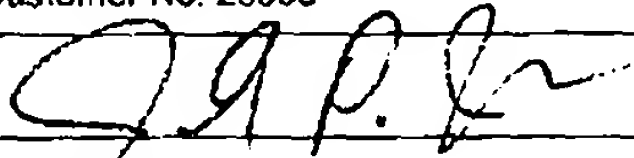
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/529,121	
	Filing Date	June 13, 2000	
	First Named Inventor	Jeffrey SCHLOM et al.	
	Group Art Unit	1644	
	Examiner Name	M. Dibrino	
Total Number of Pages In This Submission	8	Attorney Docket Number	38163-0034

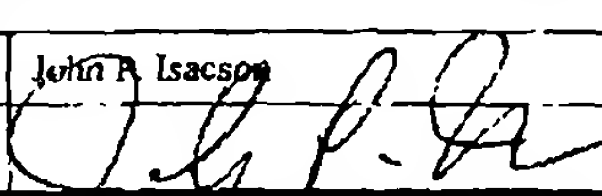
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; width: 100px; height: 20px; float: left; margin-right: 10px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John P. Isacson, Reg. No. 33,715, HELLER EHRMAN WHITE & MCAULIFFE LLP Customer No. 26633
Signature	
Date	November 25, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 			
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Signature		Date	

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FEE TRANSMITTAL for FY 2003 Effective 01/01/2003. Patent fees are subject to annual revision.		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/529,121
TOTAL AMOUNT OF PAYMENT (\$ 950.00)		Filing Date	June 13, 2000
		First Named Inventor	Jeffrey SCHLOM et al.
		Examiner Name	M. Dibrino
		Art Unit	1644
		Attorney Docket No.	38163-0034

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 08-1641 (Docket No. 38163-0034) Deposit Account Name: Heller Ehrman White & McAuliffe LLP					
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims: 17		Extra Claims: 0		Fee from below: 0	
Independent Claims: 1		Extra Claims: 0		Fee from below: 0	
Multiple Dependent					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)
**or number previously paid, if greater; For Reissues, see above					
SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	John P. Isaacson	Registration No. (Attorney/Agent)	33,715	Telephone	(202) 912-2000
Signature		Date	November 25, 2003	Customer No.	26633

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED

PTO/SB/22 (10-00)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 38163-0034
In re Application of Jeffrey SCHLOM et al.		
Application Number 09/529,121	Filed June 13, 2000	
For AGONISTS AND ANTAGONIST PEPTIDES OF CARCINOEMBRYONIC ANTIGEN (CEA)		
Group Art Unit 1644	Examiner M. Dibrino	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-1641.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a): _____.

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11-25-03

Date

John P. Isacson

Signature

John P. Isacson, Reg. No. 33,715

Typed or printed name

Custom r No. 26633

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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